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JUL 20 2005

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23280 7590 04/19/2005

DAVIDSON, DAVIDSON & KAPPEL, LLC
485 SEVENTH AVENUE, 14TH FLOOR
NEW YORK, NY 10018

07/21/2005 RMEBRAH1 00000096 10725797

01 FC:1501	1400.00 OP
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<i>Oliver Platzer</i>	(Depositor's name)
<i>Oliver Platzer</i>	(Signature)
07/18/2005	(D)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/725,797	12/02/2003	Cord Starke	5028.1003	3348

TITLE OF INVENTION: ELECTRICAL CONNECTOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	07/19/2005
EXAMINER		ART UNIT	CLASS-SUBCLASS		
NGUYEN, TRUC T		2833	439-320000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.
2. For printing on the patent front page, list
- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
- 1 Davidson, Davidson
 2 & Kappel, LLC
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed in recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Phoenix Contact GmbH

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Blomberg, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

- Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 5

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment Deposit Account Number 50-0552 (enclose an extra copy of this form).

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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date 07/18/2005

Typed or printed name Cary S. Kappel

Registration No. 36,561

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